



Town of Acton
Department of Public Health
472 Main Street, Acton, MA 01720
Phone: (978) 929-6632 Fax: (978) 929-6340
www.acton-ma.gov

ANNUAL INSPECTION HAZARDOUS MATERIALS PERMIT HOLDER

Facility Name: Import - Domestic Auto Date 3/13/13
Address: 317 Central Street
Type of Business: Auto repair Apexauto@gmail.com
Telephone: 978-635-1460 mwalsh929@gmail.com
Contact Person: Scott Initial Inspection ☐ Re-Inspection ☒

Housekeeping:	Y	N	Comments
Area clean	✓		
Spills present		✓	
Appropriate material storage	✓		
Materials and wastes separate	✓		
Cleanup materials available	✓		
Materials have secondary containment	✓		
Materials and wastes are labeled	✓		
Safety:			
Are MSDS sheets available on site	✓		
Employee personal protective equipment on site	✓		
Employees trained in Haz Mat handling	✓		
Emergency procedures posted	✓		
Site Management:			
Waste removed by licensed hauler	✓		
Floor drains present in area of Haz Mat or waste		✓	
Sinks present in area of Haz Mat or waste		✓	
Testing of septic system necessary		✓	
Does site plan on file reflect current arrangement	✓		
Any UST (underground storage tank) present		✓	
If UST present, is it alarmed		✓	

Action Items:

All OK

Reinspection required? Yes ☐ No ☒

[Signature] 3/13/13
Inspector Signature/Date

Reinspection Date: _____

[Signature]
Facility Representative Signature/Date



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ANNUAL INSPECTION HAZARDOUS MATERIALS PERMIT HOLDER

Facility Name: Central Street Gas Import-Domestic Auto Date 9/5/13
Address: 317 Central Street
Type of Business: Auto repair
Telephone: 978-635-1400
Contact Person: Scott

Housekeeping:	Y	N	Comments
Area clean	✓		
Spills present		✓	
Appropriate material storage	✓		
Materials and wastes separate	✓		
Cleanup materials available	✓		
Materials have secondary containment	✓		
Materials and wastes are labeled		✓	Label "waste antifreeze"
Safety:			
Are MSDS sheets available on site	✓		
Employee personal protective equipment on site	✓		
Employees trained in Haz Mat handling	✓		
Emergency procedures posted		✓	Provide emergency procedures
Site Management:			
Waste removed by licensed hauler	✓		
Floor drains present in area of Haz Mat or waste		✓	
Sinks present in area of Haz Mat or waste		✓	
Testing of septic system necessary		✓	
Does site plan on file reflect current arrangement	✓		
Any UST (underground storage tank) present		✓	
If UST present, is it alarmed		✓	

Action Items:

- Provide labeling

- Provide emergency plan w/ phone #'s

Reinspection required? ☒ Yes ☐ No

Inspector Signature/Date [Signature] 9/5/13

Reinspection Date: 3/12/13

Facility Representative Signature/Date [Signature]